

FIRST SEMESTER
◆ SENIOR HONORS THESIS COMPLETION FORM ◆

NOTE: This completion form allows us to keep track of your student's progress on the senior honors thesis.

Student's Name: _____ Date: _____

Student's ID#: _____ E-Mail: _____

Term: Fall___ Spring___ Summer___ Year: _____

If the student has *not* signed up for Honors 495, please indicate:

Curricular Designator: (*formerly Subject, e.g., English, Math, History, etc.*): _____

Catalog Number: (*formerly Course Number, (e.g. 403, 321, etc.)*): _____

Grade: _____ Name of Thesis Advisor: _____

This is to certify that the above student has successfully completed the work previously outlined in the Senior Honors Thesis Contract signed earlier in the semester. Please briefly describe what the student has accomplished on the project this semester.

Professor's Signature:

Thanks for your cooperation.

Please return to:

Dr. Gayle Levy, Honors Program Director
c/o Sally Mason, Honors Program Secretary
204 Haag Hall
masons@umkc.edu
Telephone 816-235-5854

